

# **Frederick County Animal Control's (FCAC) Responses to Problems Identified**

## **Final Report: Table of Contents**

### **Shelter Consultation for Animal Control Division Frederick County, MD**

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### **Summary of Strengths Identified**

- The FCAC staff was friendly and receptive to our visit and observation of their work: they are to be commended for their openness and willingness to share their experiences with us.
- Under the county's organizational structure, animal control exists as its own division with its own dedicated director and management team.
- The building is generally in good repair and of adequate size for the annual intake of the shelter.
- Computerized impoundment statistics are maintained for the shelter population.
- All cats and dogs are vaccinated and scanned for a microchip within 24 hours of admission.
- Written protocols and standard operating procedures are detailed for the vast majority of shelter operations.
- A system for daily health surveillance and reporting is in place for all animals ("morning patrol").

- **Dog adoption areas were well managed. The kennel consistently appeared clean and dry and was not crowded. Staff and volunteers worked together to provide daily walks, social interaction, bedding and novel toys for all dogs and puppies.**
- **The practice of spaying/neutering and microchipping all pets prior to placement is exemplary.**
- **Medications are available to treat many common infections and infestations of cats and dogs.**
- **Staff members have recently completed additional euthanasia training and recertification.**
- **A team is responsible for selecting animals for euthanasia.**
- **An active volunteer program is in place and foster homes are used when possible to keep young kittens out of the shelter.**
- **Priority is given to good adoption matching of animals with potential adopters.**
- **Although our visit did not focus on animal control/field services, our observations were consistent with that of a well-managed, professional unit with well-equipped vehicles and well-trained, knowledgeable, dedicated staff.**
- **Although our visit did not focus on the reception/front office management, our observations were consistent with that of a well-managed, professional office with courteous knowledgeable, staff.**

#### **Summary of Problems Identified**

- **The position of director/supervisor of shelter animal health is notably absent from the FCAC management structure, representing a mission critical deficiency.**

**FCAC Response:** The Shelter is in the process of hiring a part-time, Contractual Veterinarian at 12 hours per week, for a total of 50 weeks

- **Major deficiencies were found in the cleaning and disinfection protocols.**

**FCAC Response:** During the verbal debrief on September 5, 2008, Cornell advised of the bleach/water ratio as not being accurate and was corrected on that date.

- **The practice of veterinary medicine has been placed on the shoulders of two technicians with inadequate and inconsistent input and oversight by veterinarians.**

**FCAC Response:** Our two (2) Veterinary Technicians are entrusted with processing, vaccinating, and medicating. The two (2) Veterinary Technicians report to a Kennel Supervisor, all of which seek guidance from Veterinarians who volunteer at the Shelter, or seek advice from Veterinarians in the community.

- **Current treatment protocols for upper respiratory infection in cats include inappropriate and potentially harmful use of antibiotics.**

**FCAC Response:** After verbal debrief on September 5, 2008, strict adherence to the use of the antibiotic Doxycycline was initiated.

- **Deficiencies were noted in the medical intake protocols for cats and dogs Including vaccination, testing, segregation/quarantine and behavioral evaluation practices.**

**FCAC Response:** We have since September 5, 2008, and will continue with implementation of managing the Shelter's population to improve upon our medical intake protocols.

- **Animals are not processed in a timely fashion.**

**FCAC Response:** Animals are processed as soon as possible to expedite adoption/rescue.

- **Inadequate cat population management is resulting in unnecessary overcrowding and a high rate of upper respiratory infection.**

**FCAC Response:** Efforts are in place to manage the cat population, however as an Open Admission Shelter, and the only Shelter in Frederick County, cat and kitten season proves to be a challenge with the large number of stray/owned cats/kittens turned into the Shelter.

- **Adequate training is not being provided to animal care staff.**

**FCAC Response:** Training has been provided, encouraged and will continue based on available staffing and funding.

- **Tremendous tension surrounding animal care practices exists between staff and volunteers and between some staff members and management.**

**FCAC Response:** We would not concur that tremendous tension exists between management, staff and/or volunteers. All persons are encouraged to express their concerns and receive appropriate responses.

- **Euthanasia technicians are experiencing a high level of compassion fatigue that is exacerbated by ineffective feline population management and insufficient support systems in the shelter.**

**FCAC Response:** Euthanasia decisions are the most stressful assignment completed by staff.

- **Verification of death following euthanasia was not consistently observed prior to disposal of remains.**

**FCAC Response:** While verification did not occur during one incident, based on supervisory review, and recent Humane Society of the United States (HSUS) training, verification of death is required and does occur.

- **Only one staff member is routinely assigned to perform euthanasia Monday-Friday. Staff is not assigned to perform euthanasia on weekends.**

**FCAC Response:** Two (2) staff members are assigned Monday-Friday, however once an animal is sedated, the second employee assigned to restrain the animal is not required to remain in the Euthanasia Room. Weekend euthanasia does occur however is limited to extreme health and temperament issues.

- **Isolation facilities for animals with contagious infections are inadequate.**

**FCAC Response:** Policies have been adopted to minimize unnecessary traffic, however some movement of personnel and citizens attempting to locate missing animals is unavoidable.

#### **General Recommendations**

- **Hire a veterinarian.**
- **Revise and retrain your staff on cleaning and disinfection protocols.**
- **Revise intake and treatment protocols in accordance with current veterinary guidelines.**
- **Revise and implement feline population management protocols including improvements to cat housing areas.**
- **Implement regular staff training and support programs.**
- **Consider hiring a professional facilitator to address tensions between staff, volunteers and management.**

## **I. Staffing and Professional Services**

### **General Overview and Observations**

In general, we found the shelter to be well run with a clear chain of command. Under the county's organizational structure, animal control exists as its own division with its own dedicated division director. This indicates a high level of commitment to animal control by Frederick County. The management structure within the animal control division itself serves to ensure that the various departments have a —go-to|| person who is accountable for ensuring effective operations. An experienced, dedicated management team for field and shelter operations was in place. Employees were hard-working and caring. Volunteer involvement and community support were strong and a commitment to improving the welfare of the shelter animals was evident. Unfortunately, each of these groups of stakeholders had difficulties working with each other toward their common goal.

### **Strengths Identified**

- **Regular input from community veterinarians is available.** Veterinary involvement is essential for the maintenance of a healthy shelter population. Utilizing volunteer veterinarians can also serve to enhance the shelter's image within the local veterinary community.
- **Written protocols and standard operating procedures are detailed for the vast majority of shelter operations.** Written protocols ensure that procedures are standardized and allow staff to be held accountable for deviations from approved protocols. Written protocols also ensure that no one individual becomes a scapegoat for a particular decision and provides support for staff in performing their daily tasks especially where procedural decision making pathways must be utilized.
- **An active volunteer program is in place.** Many shelters rely on volunteers to perform tasks that are essential to enhancing the quality of life an animal has in the shelter but are too time-consuming for staff to perform on a daily basis. You are to be commended for the maintenance of a dedicated group of in-shelter and community volunteers that spend their time working on behalf of your animals.
- **Volunteer orientation is thorough and safety-oriented.** The volunteer orientation that we took part in was conducted in a professional manner. The responsibilities and expectations for volunteers were clearly outlined. Safe animal handling was emphasized. This training ensures a quality core of volunteers that can enhance shelter operations rather than hinder them.
- **Priority is given to good matching of animals with potential adopters.** A color-coded collar system is in place to provide adopters with basic information about an animal's personality. Adoption counseling is performed to thoroughly review an animal's history and discuss an adopter's expectations for their new pet.
- **Animal Control Officers are professional and well-equipped.** Animal control officers are the most visible representatives of the animal shelter in the community. The priority placed on training, continuing education, and evidence

- handling is commendable. It was clear that enforcement was an area of expertise.
- **FCAC played a key role in the recent passage of a county ordinance that prohibits tethering of dogs.** This is an important step to ensuring the welfare of community dogs and is highly commendable.
    - As requested, relevant information for public education on this topic is provided in the appendix of this section.
  - **Disaster preparedness is exemplary.** An emergency action plan is in place and the resources required to carry out such a plan are readily available.
  - **Staff retention appears to be strong.** Many of the staff members have been employed for more than one year. This is often a rare occurrence in the animal welfare field where frequent staff turnover is common. Retaining staff is an excellent way to ensure a consistently high quality of animal care.
  - **Spay-neuter and microchipping efforts are commendable.** The operation of your spay-neuter clinic, the commitment to 100% neuter-before-adoption, and the mandatory microchipping of all claimed and adopted animals are excellent ways to proactively prevent companion animal homelessness in your community.
  - **Reception staff members were professional and customer service appeared to be a high priority.** Our experiences with and observations of the reception and front office staff revealed a professional, customer-oriented, organized, courteous, and knowledgeable staff.

### **Problems Identified**

- **There is a lack of consistent veterinary oversight and input.** While the involvement of veterinarians has been commended, it is inadequate. Two and one half hours per week are not enough to remove the burden of making difficult decisions regarding medical treatment and population health management from the veterinary technicians who are burdened with other responsibilities. Proper veterinary oversight represents a mission critical function.
  - **Veterinary technicians are diagnosing disease, determining treatment plans and making critical medical decisions without adequate supervision.** In some cases, treatments and diagnostic tests are being improperly administered as a result.
  - **The position of director of animal health is notably absent from the FCAC management structure.** This represents a critical deficiency.

**FCAC Response:** Our part-time contractual Veterinarian will address this issue.

- **Animal care staffing levels may not be adequate for effective shelter operations.** This can compromise animal care and customer service while unnecessarily increasing staff stress.

**FCAC Response:** Staffing levels and Feline Management are considerations each and every day at the Shelter.

- **Adequate training is not provided to animal care staff.** Staff consistently reported that training regarding their specific daily tasks (e.g. shelter operations, understanding animal behavior, how to conduct their jobs safely, preventive health care and disease surveillance, etc.) was lacking. Inadequate training compromises animal care and public safety and increases staff stress.

**FCAC Response:** Training is provided, encouraged and is contingent on available funding

- **Tremendous tension surrounding animal care practices exists between management, staff and volunteers.** These tensions affect the health and welfare of the agency as well as its animals and staff. All three groups of stakeholders consistently cited another group as the root of many of the shelter's difficulties. This diverts time and energy from animal care and is not productive.

**FCAC Response:** We do not concur that there is tremendous tension, but do recognize management, staff, and/or volunteers feel deeply passionate when discussing animal care practices.

- **Adoption counselors spend a disproportionate amount of time on issues of minor importance.** We witnessed two canine adoption counseling sessions during our observation period. Both of these sessions strongly emphasized the avoidance of corn-based diets, spending as much time on this topic as behavior problem prevention. Considering all the things that are important for a new pet owner to be aware of, this issue is of minor importance.

**FCAC Response:** Staff and Volunteers provide a wide range of information during adoption counseling. Adoption counseling is tailored to the needs of the specific animal and the experience level of the prospective adopter.

## **II. Facility Issues**

### **General Overview and Observations**

A modestly populated, well-utilized facility that is well-managed and maintained is vital for ensuring proper care and efficient flow of animals through the shelter. In general, we were impressed with the appearance and condition of the building and the plans to continually improve the structure. Within the past several years there have been improvements to the flooring and adoption areas, and plans are underway to modify the outdoor play areas and upgrade the HVAC system. Having said that, the perfect facility does not exist. Changes in traffic patterns and the way in which specific areas of the shelter are utilized have the potential to improve animal health and well-being. As part of our recommendations in this section, we have proposed several alternatives to the current

arrangements for animal housing. We have limited our suggested modifications to those that can be done quickly and/or at a lesser cost, and did not include suggestions for adding additional square footage to the building. These recommendations are made with the goal of minimizing animal stress and infectious diseases. An architect familiar with animal shelter design should be consulted before undertaking any building project.

### **Strengths Identified**

- **The building is generally in good repair and is currently of adequate size for the annual intake of the shelter.** The condition of the shelter has a profound impact on the health of the animals as well as on staff morale and public perception. There is enough space to meet the animal holding requirements of the shelter and crowding is avoidable with attentive management of the population.
- **Regularly scheduled maintenance is provided on a contractual basis through the county.** This arrangement appears sufficient to meet the needs of the shelter and helps to keep the building in good repair.
- **There is a dedicated and well-equipped surgery suite.** We were very impressed with your commitment to 100% neuter before adoption and with the space and equipment you have allocated for surgical sterilization.
- **There is a dedicated, conveniently located room for intake that allows easy access for the public and animal control officers bringing animals into the shelter.** This enables staff to record information and administer standard procedures to incoming animals.
  - Plans to restrict access to the hallway outside of Intake will further improve this area by preventing the public from entering other areas of the shelter.
- **Most cats are removed from the general population and housed in the Sick room for treatment of infectious diseases (primarily URI).** Removal of sick animals is one key element of an effective disease control program.
- **The shelter has a secure area for containing case evidence.** Law enforcement is a clear priority of FCAC and chain of custody is ensured by the provision of a locked area for records and samples.
- **There are several large fenced-in areas outside for dogs, and an upcoming project will further improve this area.** These areas enable staff and volunteers to provide dogs with aerobic exercise, social interaction, and mental stimulation while maintaining housetraining. Furthermore, they provide a location for potential adopters to interact with the animals.
- **There are regular schedules for light/dark cycles, cleaning and disinfection,**



**and animal care.** Regular schedules for feeding, cleaning, exercise, and light/dark are well-recognized to reduce animal stress.

- **There is a large area for laundry with a commercial washer and dryer.**
- **Adequate, organized storage space exists.**

### **Problems Identified**

- **The location of the Sick room makes it completely ineffective as an isolation area.** Isolation of sick animals involves not only physically moving them out of the general population, but also increasing biosecurity and limiting contact to essential personnel. Staff continually enters and leaves the Sick room in order to access the bathrooms and lockers, which is inconvenient for staff and compromises animal care. Even those employees designated to care for the cats in the Sick room must walk through Triage, thereby exposing many other cats to infectious disease and negating the value of removing sick cats from the general population.

**FCAC Response:** Action has been taken to minimize staff traffic, however citizens respond to the Shelter each day in hopes of possibly locating lost cats which does require them to enter the room. The sick room has an exclusive heating and air-conditioning system to better assist sick cats/kittens.

- **The floor plan forces staff to routinely walk through animal housing areas to access other portions of the building.** This is stressful and disruptive to the animals housed there, particularly while they are acclimating to the shelter or are recovering from anesthesia and surgery. Whenever possible, traffic through animal housing areas should be avoided and alternate pathways should be utilized.

**FCAC Response:** Restrictions have been placed to restrict traffic through this room.

- **Some animal control vehicles do not have working fans in the animal holding areas.** Because some units do not have adequate ventilation, ACOs must ride with the back open to ensure that animals do not overheat while they are being transported back to the shelter. Although necessary to prevent overheating of animals, this is stressful, increases the risk of animal injury and/or escape, and may impinge on the professional reputation of animal control in the public's eyes. We recognize that even with a functional fan this may still be necessary to prevent animals from overheating at times of high ambient temperature.

**FCAC Response:** Animals transported in ACO vehicles are consistently monitored.

- **The tailgate makes it difficult to load large dogs into holding cages in the animal control vehicles.** This can exacerbate animal stress during loading and increases the risk of officer injury, either through back strain or an animal bite.

**FCAC Response:** ACO's have found Trucks to be effective in performance of their duties.

- **The latticework dividing Triage from Intake is incomplete and several ceiling tiles are missing or damaged.** There is no barrier to prevent escape of animals (e.g. cats, birds) from Triage into the Intake area or vice-versa. Cats can escape into even the smallest areas, causing unnecessary damage and expense. Retrieving an animal from the ceiling can be difficult and take a prolonged period of time. It is also possible for a cat to escape from Triage into Intake, and then into the hallway or even outside as the door is frequently left ajar.

**FCAC Response:** The Maintenance Department has previously indicated the need to provide a block wall to the ceiling, eliminating the latticework.

- **Quarantine is used as a multi-purpose area.** Areas truly designated for quarantine should be used to segregate healthy animals for observation. Despite the name, Quarantine is not being used in this manner but is instead used as a general holding area. In addition, Quarantine is also used for housing of dogs with infectious diseases. This effectively exposes the entire shelter population because all dogs entering the shelter spend some time in quarantine.

**FCAC Response:** Space restrictions do not allow for a true quarantine room.

- **Quarantine has very poor ventilation, resulting in high temperature and humidity levels.** Particularly during cleaning, the conditions in Quarantine are warm and humid. Such environmental conditions prolong the survival of many pathogens in the environment and increase the likelihood of disease. The only drain in the room is located underneath the fiberglass kennel unit, and it frequently becomes clogged with hair, feces, and debris. This is a health and safety issue for staff that must crawl underneath the enclosures to unblock the drain as well as for the dogs who must walk through contaminated standing water to get outside during cleaning.

**FCAC Response:** Alternative design will be considered.

- **Flooring in Triage and the laundry area is in poor condition.** It is not possible to thoroughly disinfect damaged flooring, and irregular surfaces increase the risk

of accidental human or animal injury.

**FCAC Response:** A written request dated 8/27/08 to our Maintenance Department had been previously requested to epoxy the floor in our non-public areas.

- **Triage is an inadequate size for the number of cats the shelter is currently holding.** The prolonged holding periods for cats leads to unnecessary overcrowding in the Triage area, which results in higher stress levels and increased rates of disease (particularly URI) in the feline population. Many cats languish in the shelter for prolonged periods with no decision made or action planned or initiated. Furthermore, numerous cages are arranged around the room in order to accommodate the number of cats typically held in Triage. These cages are too small for housing adult cats for more than 24-48 hours and make the room difficult to navigate (See Behavioral Care and Population Management sections for more information on housing requirements).

**FCAC Response:** Previous consultation with UC Davis, School of Veterinary Medicine, was the impetus for our 14 day quarantine due to two previous outbreaks of Panleukopenia (Cat Distemper). Evaluation of the quarantine length is under review.

- **The HVAC 2010 project may improve the ventilation system but is unlikely to result in substantial improvements on its own.** We commend you for the continual improvements made at the shelter but caution that ventilation changes will not be a permanent —cure all|| for disease without addressing other concerns such as overcrowding and cleaning and disinfection.

**FCAC Response:** The HVAC project is a CIP program.

### **III. Cleaning and Disinfection Protocols**

#### **General Overview and Observations**

Severe deficiencies were noted in the cleaning and disinfection protocols and procedures throughout the shelter. The improper use of cleaners and disinfectants prevents staff from achieving an adequate level of disinfection in the shelter. Some chemicals utilized are unsafe for both animals and people and proper safety measures are not taken. Many different protocols and disinfectants are in use throughout the facility. Protocols were followed in most, but not all circumstances, and in some cases the written procedures were incorrect.

#### **Strengths Identified**

- **Staff members were diligent and took pride in their work.** All of the staff

members we observed and spoke to during our visit were hard working and had excellent animal handling skills. The effort put into thorough mechanical cleaning (e.g. use of scrub brushes in dog areas) was outstanding.

- **Staff members are assigned to clean the same areas on a daily basis.** This helps ensure that protocols and procedures are followed consistently. It allows staff members and the animals to develop a comfort level with one another and can improve early recognition of signs of behavioral or physical illness.
- **Written protocols exist for cleaning and disinfection throughout the shelter.** The existence of written protocols allows for consistency of care between staff members.
- **Spot cleaning is utilized in some feline housing areas.** The shelter recognizes that spot cleaning is an excellent way to reduce cat stress.
- **Regular deep cleaning is performed.** Although not observed, staff members and written materials described regular deep cleaning protocols. This is an important method of preventing the build-up of organic material and infectious agents, ensuring the environment remains clean and healthy.
- **Immediate steps were taken to correct deficiencies.** Upon learning of some of the deficiencies in the cleaning and disinfection protocols in our debriefing meeting and follow-up phone conversations, immediate steps were taken to correct the problems identified.

### **Problems Identified**

- **Bleach is used at dilutions ineffective for disinfection.** Various dilutions of bleach are described in FCAC's written protocols and were used during cleaning and disinfection at the shelter. The measurements that were in use at the time of our visit resulted in solutions too dilute to achieve adequate disinfection.

**FCAC Response:** The ratio of bleach/water was corrected on September 5, 2008, as well as in our written protocols.

- **Bleach is combined with Dawn dish detergent to make cleaning solutions.** Whenever bleach was used in both the written and actual cleaning and disinfection protocols being carried out, it was mixed with Dawn. Detergents such as Dawn inactivate bleach and the two should not be mixed together.

**FCAC Response:** Consultation with Cornell has resulted in utilizing Bleach combined with Kennel Sol for disinfecting.

- **Disinfectants that pose a risk to animal and human health were in use in certain areas of the shelter.** Phenolic compounds were used in Quarantine (Tek-Trol®) and in ACO trucks for cleaning cat traps (Allstar Hospital Disinfectant). Despite label claims to the contrary, these products are ineffective at killing nonenveloped viruses such as canine parvovirus, feline calicivirus and feline panleukopenia and are known to be toxic to cats. Tek-Trol® contains small amounts of ethylene glycol which is a compound that is severely toxic to both dogs and cats. In addition, Tek-Trol® can be hazardous to humans and requires the use of extensive personal protective equipment to assure protection of the eyes, skin and respiratory tract. The poor ventilation in Quarantine makes these potential toxicities of even greater concern.

**FCAC Response:** The product Tek-Trol does indicate on its label it kills the parvovirus. Our success rate of eliminating Kennel Cough was directly attributed to Tek-Trol. At Cornell's suggestion, the use of Tek-Trol was eliminated on September 5, 2008.

- **Cats in Triage are placed in carriers or "wild boxes" for extended periods of time.** It is appropriate for cats to be in carriers for short periods of time (e.g. <20 minutes) during cleaning procedures. However, during our observations, several cats were left in their carriers without supervision for more than 1 hour while employees performed other tasks, leaving them without access to food, water or litter.

**FCAC Response:** The staff is aware of minimizing cats in carriers during cleaning.

- **Sick room cats are moved to a new cage every day.** Movement to a new cage is a known stressor to cats and increases fomite transmission of disease. Stress has a significant impact on the development and progression of upper respiratory infection.

**FCAC Response:** Cages in the sick room are fully cleaned and disinfected due to the cat's sickness. The cat is not placed in a carrier but in a clean, fresh adjoining cage.

- **Cleaning equipment is shared throughout the facility.** Brooms, mops, mop buckets, pooper scoopers and other equipment is used throughout all areas of the shelter. Sharing of equipment even occurs between Quarantine and the general population, thus compromising biosecurity and negating any effects of having a separate quarantine area.
  - **Example:** During the morning of observation, a staff member cleaning one area of the shelter was in need of a squeegee. She entered the new dog area, saw the squeegee in use and remarked 'Nevermind...I'll get the

one from 'Q.'''

**FCAC Response:** Cleaning equipment is labeled, assigned and required to remain in that area.

- **Cleaning equipment is used in a manner that facilitates the spread of infectious agents.**
  - The use of “poop buckets” facilitates the spread of fecal material from run to run. As fecal material from each run is placed into the bucket, the bucket and shovel become increasingly more contaminated
  - The “two bucket” system for cleaning the sick cat room facilitates the spread of infectious agents from cage to cage. Although the “bucket 1” rag was used once and discarded, the “bucket 2” rag was used in multiple cages. In addition, the staff member’s hands are placed into a “clean” bucket after handling a dirty rag.
  - Highly contaminated mop buckets were allowed to sit in the hallway. This creates the potential for contaminated mop buckets to be used throughout the day in different areas of the shelter.

**FCAC Response:** Issues of cross-contamination is constantly stressed to staff from Management

- **Biosecurity measures (such as changing of clothes and hand washing) were not observed.** Staff members were observed to move on to other responsibilities after completion of cleaning and disinfection procedures without changing clothes or washing hands. In addition, staff moved throughout areas of the shelter including the Sick room and Quarantine without regard for biosecurity. None of the employees were observed to wash their hands at any point throughout the morning cleaning and disinfection procedures. These practices serve to spread infectious agents throughout the facility.

**FCAC Response:** After morning cleaning, staff has been instructed to change to a clean smock. Again, the staff is constantly being reminded to adhere to efforts to reduce the spread of infectious diseases.

- **Cleaning and disinfection of food bowls, water bowls, litter boxes, traps and carriers is inadequate.** These items were cleaned with a quaternary ammonium compound (Sani-T 10) which is ineffective at killing non-enveloped viruses such as canine parvovirus, feline calicivirus and feline panleukopenia.

**FCAC Response:** Shy of an outbreak, Sani-T 10 has proven effective in our Shelter. The development of a policy is in progress to address an outbreak.

- **Footbaths were present throughout the facility and were grossly contaminated with dirt and debris.** Though their presence may enhance staff and public awareness of biosecurity, footbaths provide a false sense of security. It is not possible to achieve adequate cleaning and disinfection of shoes by stepping through a footbath mat. The moist environment that is created on a person's shoes after stepping in a footbath may actually serve to facilitate the spread of infectious agents.

**FCAC Response:** Footbaths were discontinued after debriefing on September 5, 2008.

- **Flooring in Triage was covered with a visible layer of scum.** The floor in Triage was scuffed and stained with a visible layer of scum throughout the room. This makes adequate cleaning and disinfection impossible.

**FCAC Response:** Work order in place with Maintenance for repairs.

- **There are no cleaning and disinfection protocols for non-animal housing and common areas.** Areas such as hallways and offices and objects such as cage locks, door knobs, light switches, floor drains, cage tops, shelving, computers, phones, etc. should all have written cleaning and disinfection protocols. Infectious agents can easily accumulate on these commonly overlooked but frequently touched areas. Many of these objects come into contact with animals and act as fomites for spread of disease.

- **Example:** When asked, one staff member indicated that the cage locks had not been cleaned in the five years of her employment.

**FCAC Response:** Major cleaning occurs on Sundays, since the Shelter is closed, and these problem areas will be addressed.

- **The puppy play area is not able to be disinfected.** A fenced-in, grassy area outside is utilized as a puppy play area. It is not possible to clean or disinfect this area. Parvovirus can survive for years in soil even if the ground freezes in the winter.

**FCAC Response:** The outdoor kennel improvement should address this issue.

- **Cleaning and disinfection protocols for specific disease outbreaks are inadequate.** Written cleaning and disinfection protocols for specific diseases (i.e. feline panleukopenia, canine parvovirus, FeLV, FIV) do not exist. According to page 32 of the Kennel Technician Handbook, cages contaminated with canine parvovirus or feline panleukopenia are left empty for 72 hours and are sanitized daily. According to shelter employees, such cages are left empty for seven days. Cages exposed to FeLV or FIV are left empty for three days and are sanitized daily. These protocols are unnecessary and, if sanitized according to current

procedures, are ineffective.

**FCAC Response:** Cleaning and disinfecting protocols are being reviewed and established written policies will be added to Kennel Technician Handbook regarding Feline Panleukopenia, Canine Parvovirus, FeLV, FIV.

#### **IV. Medical Intake Protocols**

##### **General Overview and Observations**

The current written medical intake protocols for dogs, cats and puppies should be updated to reflect current recommendations for animal shelters. Written protocols and Standard Operating Procedures (SOPs) for medical intake protocols were mostly in accordance with the practices that were actually observed during our visit. Recent publications and advances in the field of shelter medicine have resulted in a number of revisions to the recommended practices that will help ensure the health and well-being of the shelter animals.

##### **Strengths Identified**

- **Written intake protocols exist for adult cats, adult dogs and puppies.** Written protocols ensure that procedures are standardized and allow staff to be held accountable for deviations from approved protocols.
- **Each animal is vaccinated within 24 hours of arriving at the shelter.** This is essential to maintaining both individual animal health and to protecting the health of the population of animals within the shelter.
- **Animals are evaluated by designated veterinary technical staff members whose sole responsibility is medical care.** Having designated medical staff is an excellent way to ensure that animals receive consistent care and allows those individuals to focus on honing their own skills.
- **FCAC policy requires all animals to be scanned for a microchip at intake and at multiple time points during their stay.** Global scanners are in use. The shelter has the tools to locate any microchip in an animal.
- **All animals are weighed on intake.** This is an important practice to establish a baseline weight for monitoring the health status of animals in the shelter.
  - In particular, weight loss is a valuable indicator of illness and behavioral stress in shelter cats.
- **Each animal is photographed on intake and descriptions are posted on the internet.** This is an important proactive effort toward increasing the number of animals returned to their owners.



- **An intake history form is completed for all owner surrendered animals.** This is a useful method of learning as much as possible about an animal in order to provide the best care in the shelter and improve successful adoption matching.

### **Problems Identified**

- **Vaccination protocols are not in accordance with the American Animal Hospital Association (AAHA) and the American Association of Feline Practitioners (AAFP) recommended guidelines for shelter animals.** Current protocols are not the best use of resources and leave many animals vulnerable to infectious disease.

**FCAC Response:** If approved, vaccination protocols to be evaluated by our contractual veterinarian.

- **Pregnant animals are not vaccinated (OPS 003).** This policy is not in accordance with currently published guidelines for shelters and places those animals and their offspring at risk for infectious disease. In the shelter setting, the benefits of vaccinating pregnant animals far outweigh any theoretical risks.

**FCAC Response:** While OPS 003 of our SOP does state “Pregnant cats will not be vaccinated” the practice has been to vaccinate. OPS 003 changed, 1/28/09.

- **Modified live vaccinations were improperly stored during processing.** On a number of occasions, an entire tray of feline vaccinations was placed on a shelf in Triage for an extended period of time. This results in decreased vaccine efficacy.

**FCAC Response:** Not the normal practice and was addressed with the Veterinary Technicians.

- **Written de-worming protocols are inadequate.** Existing protocols for kittens and puppies do not differ from those of adult cats and dogs. Protocols state: “If coccidia or tapeworms are suspect [sic], then treat appropriately.” Clinical signs that constitute “suspicion” and “appropriate” treatment protocols are not provided.

**FCAC Response:** Existing protocols updated.

- **There is no written medical intake protocol for cats less than 6 months of age.** The medical needs of kittens differ from those of adult cats in the shelter. A separate medical intake document should be created.

**FCAC Response:** Written medical intake protocols have been written.

- **Litters of kittens may be “batch” tested for FeLV and FIV.** This practice is

inappropriate and produces unreliable test results. It may result in the misidentification of the viral status of a kitten.

**FCAC Response:** “Batch” testing has been discontinued.

- **Any cat with an unknown vaccination status is not available for adoption for at least 14 days.** This results in an unnecessary increase in the length of stay for each cat which contributes to overcrowding of the shelter and serves to hasten both the physical and mental deterioration of animals in the shelter. This is evidenced by the fact that nearly 50% of the cats in the Triage area during our visit were exhibiting signs of upper respiratory infection.

**FCAC Response:** The 14 day quarantine will be addressed with consultation with the contractual Veterinarian.

- **Written protocols require taking body temperature on each animal prior to intake procedures.** This may be a source of stress for newly admitted animals and the information obtained may not be clinically relevant.

**FCAC Response:** To be discussed with the Contractual Veterinarian

- **Every puppy under 6 months of age is tested for canine parvovirus.** If proper vaccination, cleaning and disinfection, and medical evaluation protocols are in place the risk of a parvovirus outbreak is minimal. Testing every puppy is not a good use of shelter resources. In most cases, if a puppy appears healthy and tests positive for parvovirus, the result is in error.

**FCAC Response:** Parvovirus has serious effects on a shelter, however issues with testing are constantly being evaluated.

- **Animals are not processed in a timely fashion.** Although most animals are vaccinated within 24 hours of arrival, the remainder of the processing procedures may not be completed for as many as 12 days after arrival at the shelter (e.g. intake 09-1117). This is an inefficient use of staff time and delays recognition of individual animals' problems and needs, including early identification of infectious diseases. Prolonged delays lead to shelter crowding and increased animal care costs.

**FCAC Response:** Delays in processing occurs, however we strive to minimize the delay.

- **Microchip scanning technique is inadequate.** Although global scanners were in use, scanning technique varied by staff person and presentation of animal (i.e. in a carrier/trap or not). This creates the potential for missing the identification of a microchipped animal.

**FCAC Response:** We have trained and retrained personnel in the proper usage of the scanners and have incorporated scanning through multiple procedures within shelter movement.

- **Collars and ID tags on incoming dogs and cats are immediately removed on intake.** This is done to preserve the collar and ID tags for the owners upon reclaim. This extra step during the intake process may be unnecessary and has the potential to result in misidentification of animals.

**FCAC Response:** Some collars and chokers are safety risks while an animal is kenneled. We have not had a case of misidentification.

- **As a matter of unwritten policy, singleton kittens from different litters will not be co-housed.** This policy results in the need for additional cage space and therefore additional staff time and shelter resources in caring for separately housed cats. This also results in the social isolation of the kittens.

**FCAC Response:** To be discussed with a Veterinarian. Our purpose is to avoid infection.

- **As a matter of unwritten policy, orphaned kittens will not be placed with lactating queens in the shelter.** This policy results in the need for additional cage space and therefore additional staff time and shelter resources in caring for separately housed cats. More importantly, this results in social isolation of kittens and deprives them of maternal interaction that is essential for their proper social and emotional development. In the case of nursing kittens, this practice also deprives them of the best available nutrition. The benefits of matching orphaned kittens with nursing queens far exceed the associated risk of increased exposure to infectious disease.

**FCAC Response:** In the past, we have attempted placing a lactating queen with kittens needing nutrition. We utilize foster care providers for underage kittens.

- **Photographs of animals are not utilized to their full extent and some website descriptions of animals are inaccurate.** During our visit, we observed someone who attempted to reclaim an animal that was posted on the internet with an incorrect description. Had a photograph been available the confusion surrounding this event would have been minimized and could have resulted in a shorter length of stay for that animal.

**FCAC Response:** We continue to evaluate the best usage of Digital photographs.

- **Animals that come to the shelter with any wound are automatically placed under rabies quarantine.** While the attention given to rabies control in your county is commendable, this practice may not be necessary for all animals.

**FCAC Response:** Due to Maryland Law, specifically the Annotated Code of Maryland, Health-General Article, Code of Maryland Regulations, 10.06.02 "Rabies," we are bound by those Regulations due to public safety of an animal not current on rabies vaccinations when that animal has bite wounds of an unknown origin and verified by a Veterinarian.

## **V. Treatment Protocols**

### **General Overview and Observations**

The Veterinary Technicians (VTs) examine animals during processing or if signs of illness develop following admission. Prescribed medications are administered by kennel technicians.

Dogs with contagious disease are housed in Quarantine. For dogs, diseases commonly treated in the shelter include wounds, skin infections, ear infections, hip pain/arthritis, intestinal parasites, lyme disease, diarrhea, kennel cough, ringworm, mange, and fleas.

Cats with contagious disease are housed in the sick room. For cats, diseases commonly treated in the shelter include URI, wounds, skin infections, intestinal parasites, diarrhea, ear mites, and fleas.

Volunteer veterinarians are available for 2.5 hours per week for on site consultation and examination of animals presented by the VTs. Eye problems, maggots, fractures, animals that need radiographs, and others as deemed necessary by the VTs are signed up to see a veterinarian. Typically, there are approximately 10 animals on the "vet check" list to be seen at a time.

Written protocols for diagnosis and treatment are not available. According to the VTs, kennel cough is treated with doxycycline. Abscesses and wounds are treated with clavamox. Oral abscesses are treated with clindamycin. Skin infections are treated with cephalexin. Antibiotics are used at the following dosages:

- Clavamox: 10mg/kg BID
- Baytril: 5mg/kg SID
- Clinadamycin: 15mg/kg SID (cats)

For treatment of URI, amoxicillin is initially prescribed for kittens and clavamox for adult cats.

- If no improvement is seen after 5 days, the antibiotic is changed to cephalexin.
- If no improvement is seen after 5 additional days, the antibiotic is again changed to clindamycin or the cat is euthanized.

- If no improvement is seen after 5 additional days, the antibiotic is again changed to baytril or the cat is euthanized.

All cats/kittens in the sick room receive lysine (250 mg orally once a day). Cats with red, runny eyes receive NeoPolyBac ointment. Fluids are rarely administered. Cats that are dehydrated and in need of fluids are typically euthanized.

### **Diagnostic Testing of Cats with URI**

In order to better guide recommendations for treatment, we provided funding for diagnostic sampling of up to 20 cats with severe upper respiratory disease at FCAC. Sample collection instructions can be found in the appendix at the end of this section.

From October through December, we received samples from a total of 4 cats from FCAC. Bacterial culture and sensitivity results are summarized. These cats were each reported to have failed to respond to treatment for upper respiratory tract infections. Shelter staff indicated that they previously used doxycycline to treat most or all URI cats but felt that it was no longer an effective antibiotic. More recently, the VTs have been using Amoxicillin, Clavamox, Cephalexin, Clindamycin or Baytril at varying doses and for various durations depending on the individual case (see above).

Shelter data for the incidence of URI was not available, but the perception among staff is that 70-80% of cats develop signs necessitating treatment within 1 week of entering the shelter. During our site visit, we examined all cats housed in triage that had been in the shelter for 3 or more days and found that approximately 50% of them were exhibiting signs of URI.

There was no bacterial growth from any of the lung samples. Although *Pasteurella multocida* was isolated from tracheal swabs from 3 of the cats, this most likely represents normal bacterial flora that could be found in a tracheal sample from any healthy cat. However, the bacteria were resistant to Clindamycin, which is likely the result of chronic usage of this antibiotic in the shelter that has promoted antibacterial resistance. The results from these four cats do not provide an explanation for the observed treatment failures. Other causes for treatment failure should be considered including dehydration. Because the number of samples received is so small, it is possible that other bacterial infections are present in the shelter population. The presence of resistant *Pasteurella* is an indication that the use of Clindamycin in the shelter should be discontinued.

### **Strengths Identified**

- **The VTs are hard-working and dedicated to animal care.** They apply their knowledge to provide the best care that they can for the animals of FCAC.
- **A system for daily surveillance and reporting of health problems is in place**

**for all animals.** Morning patrol with the clipboard reporting system is a key component of managing both the healthcare of individual animals and the population as a whole. The fact that the staff carries this routine out daily is to be commended.

- **Medications are available to treat many common infections and infestations of cats and dogs.** The shelter stocks routine medical supplies and prescription medications.
  - Shelter policy allows for the treatment of common ailments including URI rather than establishing these as criteria for automatic euthanasia.

### **Problems Identified**

- **The practice of veterinary medicine has been placed on the shoulders of two technicians with inadequate and inconsistent input and oversight by veterinarians.** Veterinary technicians are diagnosing disease, determining treatment plans, and making critical medical decisions without adequate veterinary supervision. In some cases, treatments and diagnostic tests are being improperly administered.

**FCAC Response:** Our two (2) Veterinary Technicians report to a Kennel Supervisor and interact weekly with two volunteer Veterinarians. Direct supervision will occur with our Contractual Veterinarian.

- **Current treatment protocols for upper respiratory infection in cats are inappropriate and potentially dangerous.** Current practices for selection and use of antibiotics are inappropriate and contribute to the development of resistant bacterial infections, which can compromise both animal and human health.
  - **Medications are frequently underdosed.** Inadequate dosing of antibiotics results in treatment failure and contributes to the development of antibiotic resistance.

**FCAC Response:** A Contractual Veterinarian can provide specifics of antibiotics and dosage.

- **Isolation facilities for animals with contagious infections are inadequate.** Biosecurity is compromised resulting in increased transmission of disease.

**FCAC Response:** We continue to evaluate effective isolation, however we address each day citizens responding to our Shelter in hopes of finding their lost pet.

## VI. Behavioral Care

### General Overview and Observations

Behavioral health is critically important for cats and dogs. Stress and problem behaviors are common in animals housed in shelters. These problems may be the reason that the animal was relinquished in the first place, or shelter life may result in behavior problems. Problem behaviors are most likely to be seen in animals that are housed for prolonged periods of time or in poorly enriched environments, but the stress of even short-term confinement can compromise both physical and behavioral health, negatively impacting animal welfare. Furthermore, stress is intimately related to immunity and chronic stress compromises the immune system, lowering resistance to infection. For these reasons, minimizing stress has the potential to greatly improve animal welfare, decrease infection rates and disease transmission, and enhance the adoptability of shelter animals.

Even under the best possible conditions, animal shelters are stressful by their very nature: incoming animals are confined and exposed to varying intensities of new and novel stimuli as well as to a variety of infectious disease agents. This stress begins the moment an animal enters the shelter. When confined long-term, cats and dogs often suffer from anxiety, social isolation, inadequate mental stimulation and lack of exercise, all of which can adversely affect their physical and behavioral health and lessen their adoptability.

Understanding the importance of minimizing stress in cats and dogs and possessing the ability to recognize and respond to it are keys to maintaining proper behavioral welfare. Staff should be trained to recognize indicators of stress. All shelters should have a behavioral wellness program that is based on proactive strategies to decrease stress from the moment animals arrive at the shelter until the moment that their stay ends. Such a program should provide for proper housing, consistent daily routines, adequate exercise, mental stimulation, social companionship and positive-reinforcement-based training. Enrichment programs that are designed to prevent the development of problem behaviors and behavioral evaluations designed to detect as many problems as possible should also be in place. While some problems will be severe enough that an animal cannot be considered for placement, other problems can be addressed in the shelter. The importance of problem detection should never be discounted, as even the best-equipped shelter will be unable to modify a behavior or match the pet to an appropriate home if they are unaware that any problem exists. Formal behavioral evaluations also help to protect the shelter from the legal liability associated with adopting aggressive animals.

### **Strengths Identified**

- **Veterinary technicians perform an informal behavioral assessment for all dogs during processing.** This evaluation helps gauge how dogs respond to a variety of different types of handling in a veterinary setting.

- **Color coding of collars (dogs) and cage cards (cats) provides adopters with basic information on the behavior of a potential pet.** Meeting an adopter's expectations of their new pet is the single most important factor for ensuring a successful adoption. Providing information to potential adopters about an animal's behavior helps people select a pet that fits their expectations and lifestyle rather than having them choose one based solely on appearance.
- **All dogs are walked at least twice daily on a regular schedule.** Regular walks provide dogs with mental stimulation, exercise, and a positive event to look forward to each day while helping to maintain or promote housetraining. Even a few minutes outside of the enclosure and away from the sights, sounds, and smells of the shelter are extremely important for a dog's well-being.
- **Almost all animals have a variety of toys in their enclosures, and these are rotated on a daily basis.** The provision of toys is excellent enrichment for animals in the shelter, providing them with an opportunity for physical activity and mental stimulation. Novelty is important to keep cats and dogs interested in their toys, and the daily rotation ensures that animals do not have time to become bored with the same old toy.
- **Feral-behaving cats are given a Wildbox and time to acclimate to the shelter before they are designated as feral.** It is important to recognize that some tame cats may appear feral on entry to the shelter due to stress.
- **Dog adoption areas were well managed.** The kennel consistently appeared clean and dry and was not crowded. Staff and volunteers worked together to provide daily walks, social interaction, bedding, and novel toys for all dogs and puppies.
  - The staff knew all of the dogs' names, talked soothingly to them and handled them in a non-stressful manner throughout the day.

### **Problems Identified**

- **Many of the cats are highly stressed.** During our visit many cats were seen to be feigning sleep, displaying disruptive behavior, and trying to hide under their bedding. Staff seemed unaware of the significance of these behaviors and did not know how to accurately interpret the cats' body language. With the exception of providing Wildboxes for the feral-behaving cats, there is no plan for stress reduction for the cats.

**FCAC Response:** We instituted from our debriefing on September 5, 2008, the use of materials to provide stress reduction.

- **Many cat cages are too small to meet many of their physical and behavioral needs.** The large number of cats available in a fixed space relegates many cats to



cages that are simply too small to meet their needs. The small floor space does not allow for recommended distance (2-3 feet) between food bowls and the litter box, the addition of a hiding box, or room for the cat to stretch out and walk a few steps. This contributes to stress and adversely affects their well-being, compromising both physical and behavioral health. The sheer number of cats in individual housing essentially prohibits staff and volunteers from fulfilling the cats' social needs. This is compounded by the fact that many cats stay in adoption for long periods of time, backing up the system and leading to crowding in other areas of the shelter.

**FCAC Response:** The cat cages utilized in our Shelter are standard Shelter cages.

- **Staff does not receive any formal training on animal behavior, body language, or recognizing signs of stress.** Although we found your staff to have excellent handling skills and an intuitive knowledge of canine body language, the lack of formal training results in noticeable deficiencies that can diminish the quality of care provided and pose a risk to human health and safety. Staff members seemed less aware of body language and signs of stress in cats or ways to alleviate stress.

**FCAC Response:** Future training will be provided contingent on funding.

- **Rabbits and small mammals are housed in the small dog/puppy area, in view of both cats and dogs.** Rabbits and small mammals (e.g. guinea pigs, hamsters, gerbils) are prey species. It is extremely stressful for them to be housed in an area where they are subjected to olfactory, auditory, and visual contact with predatory species including cats, dogs, and ferrets. These animals need to be housed in a quiet area of the shelter away from predators.

**FCAC Response:** The Shelter has a maximum of 6 rabbits on our adoption floor. Small mammals are sent to Rescue Organizations as soon as possible.

- **There is no formal behavioral assessment for dogs.** Although veterinary technicians are evaluating behavior at the time of processing, the process as it currently exists provides the shelter with limited information based only on handling and will not identify dogs with certain forms of aggression (e.g. resource guarding, dog-dog aggression).

**FCAC Response:** We previously utilized the Sternberg and S.A.F.E.R methods of temperament testing, however those tests are a 20 to 30 minutes snapshot in time as to temperament. Our current assessing is based on observations by our Kennel Supervisor, Veterinary and Kennel Technicians as the dogs' aggression towards people, animal and/or food aggression over several days.

- **Volunteers are not always informed of potentially dangerous problems.** The

document entitled “Dog Dos & Don’ts – General Guidelines for Volunteers on the Adoption Floor” instructs volunteers not to clean up food while a dog is in his kennel. While this is important advice for any dog, the document mentions that “some dogs have food aggression and volunteers are not always informed of this behavior.” This is a human safety issue and a potential liability for the shelter and needs to be rectified immediately.

**FCAC Response:** Our Volunteer Coordinator provides direct supervision of Volunteers, however in our Shelter, volunteers are restricted from contact with some animals.

- **Dogs receive minimal enrichment and exercise while housed in Quarantine.** Dogs housed in Q can only be walked by staff members, who do not have sufficient time to interact with the dogs other than for short walks during cleaning. Although we recognize and appreciate the medical and liability reasons behind these policies, some dogs stay in Q for extended periods of time before they are processed, for rabies quarantine, while awaiting rescue, because of illness, or for behavioral reasons. Prolonged stays heighten the need for enriched housing and social contact with other dogs and people, but even the first experiences in the shelter can have a profound impact on an animal’s ability to adapt and cope in such a stressful setting.

**FCAC Response:** Housing is limited in a Shelter environment, and we do strive to process in a timely manner. Liability is a concern and restriction of persons handling or moving is critical.

## **VII. Feline Population Management**

### **General Overview and Observations**

During our visit, staff expressed an overriding concern regarding the cat population. We observed crowded conditions in all cat housing areas, as the shelter was housing more than 200 cats (approximately 30% in adoption, 60% in Triage, and 10% in the Sick room). Cats were housed in cramped quarters without the ability to exercise and receive necessary social interaction and mental stimulation. Many cats were exhibiting marked behavioral signs of stress. Approximately 50% of the cats and kittens in Triage that had been housed in the shelter for  $\geq 3$  days had upper respiratory infections.

### **Strengths Identified**

- **Statistics on numbers of incoming animals, length of stay, and final disposition are kept for cats and kittens.** Keeping accurate information on the number and characteristics of animals entering the shelter, as well as their length of stay and final disposition, is vital to understanding and managing the population successfully.

- **Foster homes are used when possible to keep young kittens out of the shelter.** Young kittens are highly susceptible to disease and should not stay in the shelter for any period of time if at all possible. Immediately placing these animals into foster care helps keep them healthy, better meets their social needs, and helps to keep the in shelter population at a manageable level.
- **Once a commitment has been made to place an animal all reasonable efforts are made to ensure a successful outcome that is not contingent on time in the shelter.** Although short lengths of stay should always be a goal, artificial timelines can be unfair to both staff and animals. Once the shelter has made the commitment to place an animal for adoption and has invested in his or her care (especially once an animal has been surgically sterilized) all attempts should be made to place that animal as long as he or she remains medically and behaviorally healthy.
- **A system for daily surveillance and reporting of health problems is in place for all animals.** Morning patrol with the clipboard reporting system is a key component of managing the healthcare of individual animals and the population as a whole.
- **Resources are available to help keep animals in their homes, including information about low-cost spay/neuter and trap-neuter-return programs.** Keeping animals from entering the shelter is a win-win situation for both the animal and the shelter.
- **Shelter staff is cognizant of the risks of crowding and is interested in assistance in managing the feline population in the shelter.** Buy-in from staff and key stakeholders is fundamental for any shelter program to be successful. Your staff's understanding of the dangers of crowding and recognition of the challenge of proper management of the cat population will be vital to enacting change.

### **Problems Identified**

- **Ineffective population management has led to prolonged average lengths of stay for cats resulting in an unnecessarily high average daily population in the shelter.**
  - Overcrowding has created a vicious cycle in which the population of the shelter is extended far beyond the functional capacity of the staff and the facility to provide humane care for the animals, protect animal health, and effectively move animals through the system.
  - Stress, for both animals and humans, are ensured because current management practices have led to overcrowding.

- The rate of feline upper respiratory infection is needlessly high. Poor population management and inadequate facilities for isolation of sick cats result in needless stress and illness for cats.

**FCAC Response:** Population management is extremely important, and as mention earlier, a Veterinarian can provide appropriate direction as to quarantine length and designation of isolation areas.

- **Some vital shelter statistics are not routinely recorded, while others appear to have been recorded inaccurately.** Data can not be separated based on origin (e.g. stray vs owner relinquished), and in some cases can not be separated based on age of animal (e.g. number of cats vs. kittens euthanized). Length of stay data appears to be incorrect owing to the large number of cats and kittens with lengths of stay of 0 days and on the basis of DOA animals with varying lengths of stay (from -365 to 18 days).
  - **The missing or erroneous data makes it difficult or impossible to calculate some measurements (housing capacity, live release rates) necessary for decision-making.**

**FCAC Response:** Data requested by Cornell after their visit is not captured on a daily basis. We requested assistance from IIT

- **Cats are housed in the shelter even when immediate placement options exist.** Every reasonable opportunity to either prevent a cat from entering the shelter or to enable a cat to leave the shelter should be taken.
  - **One individual was told he would not be allowed to take back a cat that he had trapped on his property despite being willing to care for it.**
    - i **Example: Intake # 09-1344.** A kennel technician received a cat in a trap from a Good Samaritan. He explained that he had brought another cat in the day before and that the VT had left him a telephone message that the cat was a tame nursing mother. In the message, she had suggested that the mother cat be spayed and then returned to the Good Samaritan to care for her kittens, and that he should search the area for kittens. The Good Samaritan was very concerned and stated that he had searched but had not found the kittens. He agreed to take the mother cat back to find and care for her young. The kennel technician informed him that it was too late. She stated that he had already turned the cat in and could not take her back. The Good Samaritan asked if he could speak to the VT that had called him and gave the kennel technician her name. The kennel technician stated that the VT was not there. (In fact, she was available, but was neither consulted nor told that the Good Samaritan was

inquiring about the mother cat). The Good Samaritan asked if there could be a mix up. He stated that after he got the call from the VT, he looked on the FCAC web site. According to the Good Samaritan, the web site indicated the cat he had brought in the day before was a male cat. He politely asked repeatedly if it were really a mother cat and insisted he would provide care for her so she could care for her kittens. The kennel technician again told him that he could not have the cat back and furthermore stated, “she will probably get a home”. The Good Samaritan’s concerns were dismissed despite his polite and persistent concern and willingness to provide care for the cat. He left the shelter clearly troubled about the situation.

**FCAC Response:** We believe this is an isolated incident that was improperly handled by our Kennel Technician. This incident should have been referred to a Supervisor, which is the normal practice that occurs daily in our Shelter. For the Kennel Tech not to locate the Veterinary Technician and pursue proper handling is inexcusable.

- **In one case, a litter of pre-weaning kittens was allowed to remain in the shelter instead of going to an available foster home.** There was only one foster home immediately available for this particular litter of kittens, but the shelter chose not to transfer them to that home. Instead, the kittens were kept in the shelter on a stray hold. This was done despite the fact that they had been trapped on the property of a Frederick County citizen and that animals less than 3 months of age are not required to be held according to Maryland Criminal Law, statute §10-617: Disposal of domestic animals.

**FCAC Response:** Foster care providers are always being sought and utilized.

- **Cats are often vaccinated and processed on two separate occasions.** The practice of vaccinating animals and then later performing a physical exam and other processing procedures is an inefficient use of staff time. The requirement for multiple steps before an animal can transition to a different area of the shelter increases the likelihood that timely movement will be delayed, thereby prolonging length of stay and increasing crowding.

**FCAC Response:** Vaccinations of incoming animals is performed within 24 hours. Often times, due to stress, processing the animal and accurately assessing temperament cannot occur within that time frame.

- **Unvaccinated cats are quarantined for a minimum of 14 days.** This is neither medically necessary nor desirable from a population management standpoint as it serves to prolong the length of stay, contributes to crowding in the Triage area, and increases upper respiratory infections.

**FCAC Response:** The 14 day quarantine is being revised, however the rationale was established in June of 2003 after a panleukopenia outbreak. The 14 days was determined after consultation with UC Davis, School of Veterinary Medicine. Any change will occur after consultation with our Contractual Veterinarian.

- **On occasion, cats are housed for prolonged periods of time.** At the time of our evaluation, the shelter was housing a cat named —Tom|| in the sick room for a 6 month bite quarantine. Tom had entered the shelter several months earlier and has been housed in the same small, unenriched cage with minimal social contact the entire time. In addition to the deleterious effects on Tom’s behavioral and possibly physical health, the decision to house any individual animal in the shelter for 6 months represents a poor use of space, staff time, and financial resources. Although there will occasionally be animals that remain in the shelter for extended periods of time due to unforeseen circumstances, it is not recommended to consciously elect to keep an animal for such a duration given the current shelter set-up and live release rates for cats.
  - At a minimum, this cat should have been housed in a larger cage. If an owner was found to keep an animal in such conditions in their home it could be considered neglect according to Maryland statute. Maryland Criminal Law, §10-604 Abuse or neglect of animal, states that it is prohibited for a person to “unnecessarily fail to provide the animal with nutritious food in sufficient quantity, necessary veterinary care, proper drink, air, space, shelter, or protection from the weather.”

**FCAC Response:** This one-time, isolated incident was a 6 month quarantine due to the cat having bite wounds of an unknown origin (WOUO). The 6 months began at a time the Shelter population was low. In reviewing this incident, the Shelter would not allow a 6 month quarantine in the future.

- **Euthanasia for population management is only performed on weekdays.** Kennel technicians are scheduled to perform euthanasia Monday through Friday, and the veterinary technicians and animal control officers perform euthanasia for sick or injured animals on an as-needed basis during the weekends. From May to October, the shelter euthanizes an average of 230 cats and kittens each month. If euthanasia was performed 7 days a week, this would mean that an average of 8 feline euthanasias would be performed every day. Not performing euthanasia on the weekend creates a backlog of animals waiting to be euthanized, making it easy to fall behind.
  - This increases the shelter population and all the negative factors resulting from overcrowding.
  - It also increases the burden on the kennel technicians performing euthanasia, who must then euthanize an average of 24 cats and kittens on Mondays, leading to compassion fatigue and burnout for the staff.

- Finally, delays in performing euthanasia unnecessarily extend shelter stays for some animals that must languish in the shelter for additional time before they are euthanized.

**FCAC Response:** Euthanasia decisions are final. While euthanasia does not occur routinely on Saturdays, when the need clearly exists, a supervisory member is contacted. Sundays the Shelter is closed to the public.

- **The cat adoption area is “overstocked” for the average number of adoptions each month.** Kitten adoptions far exceed adult cat adoptions for the majority of the year, but most cats available for adoption are over 6 months of age. Additionally, the number of cats in adoption is very high relative to the total number of adoptions each month, leading to prolonged average lengths of stay.

**FCAC Response:** We maximize our floor adoption space to provide the most visibility to achieve our goal of adopting as many animals as possible.

- **Current cat housing is inadequate for the average length of stay in the shelter, contributing to stress and disease.** The large number of cats available in a fixed space relegates many cats to cages that are simply too small to meet their needs.
  - The small floor space does not allow for recommended distance (2-3 feet) between food bowls and the litter box, the addition of a hiding box, or room for the cat to stretch out and walk a few steps.
  - This contributes to stress and adversely affects their well-being, compromising both physical and behavioral health.
  - The sheer number of cats in individual housing essentially prohibits staff and volunteers from fulfilling the cats’ social needs.
  - This is compounded by the fact that many cats stay in adoption for long periods of time, backing up the system and leading to crowding in other areas of the shelter.

**FCAC Response:** While we fully understand managing our Shelter population, unless they are littermates, we only house one cat per cage. On occasion, we will combine juvenile aged cats for reasons stated above.

## **VIII. Euthanasia**

*Note: Only a few animals were selected for euthanasia and euthanized during the consultation and observation period.*

## General Overview and Observations

The shelter has a single-purpose room for euthanasia. Euthanasia is generally performed by the kennel technicians. Each technician is assigned to perform euthanasia 1 day per week Monday-Friday. ACOs may perform euthanasia after hours and veterinary technicians may perform euthanasia on weekends, as needed, or if emergencies arise. Staff members performing euthanasia have undergone training and certification consisting of hands on training with another certified technician, a written test, and observation by a veterinarian. In August 2008, staff participated in an HSUS euthanasia course for recertification.

Animals are selected for euthanasia by an Animal Assessment Team (A2 Team) which consists of one supervisor, one vet tech, one kennel attendant, and one volunteer. The vet techs present animals and the team makes a determination based on physical and behavioral health and population. If the team does not approve the euthanasia, a 48-hour time period is allowed to find an alternative for that pet (foster, rescue, other).

Euthanasia is carried out using IV injections of Fatal Plus (1 cc per 10 lbs. body weight) whenever possible. When necessary, animals may be presedated with Ketamine-Xylazine (2 cc Xylazine 100 mg/ml added to 10 ml Ketamine 100 mg/ml; cats: 0.3 cc IM, dogs: 0.6 cc per 10 #). IP injection is utilized for small kittens. IC injection is only used in deeply anesthetized (unconscious) animals.

### Strengths Identified

- **There is a room dedicated to euthanasia.** A lock box is present, and appropriate control drug logs and equipment appear to be in place.
- **Staff members have recently completed additional euthanasia training and recertification.** Staff training is important to ensure that euthanasia is performed safely and humanely and is associated with improved ability to cope with the psychological stress of performing euthanasia in an animal shelter.
- **A global (ResQ) scanner is available and animals are scanned prior to euthanasia.** A recent study of scanning procedures in animal shelters revealed that approximately 13% of microchips detected were not found during the initial scan of the animal. This makes careful scanning of animals on more than 1 occasion essential to improve the odds of identifying all microchips. Scanning before euthanasia is an element of diligence on the part of the shelter and may prevent unnecessary euthanasia of an owned animal.
- **Animals are taken to the euthanasia room and euthanized one at the time except in the case of litters where it is appropriate for them to be kept together during these procedures to prevent separation stress.** With few exceptions, animals should not be allowed to view other animals that have been or



are being euthanized. A barrel with a lid is kept outside of the room and remains are placed in the barrel prior to bringing another animal into the room for euthanasia.

- Studies reveal that the provision of a single purpose euthanasia room and the removal of euthanized animals prior to entry of additional animals are associated with decreased turnover among employees performing euthanasia in animal shelters.
- **A team is responsible for selecting animals for euthanasia.** This practice helps ensure that no one individual becomes a scapegoat for a particular decision and provides support for staff during the selection process.
- **The staff performs owner witness euthanasia.** This is a valuable service to the public and greatly reduces animal stress during these procedures. In addition, it builds trust with the public as they are allowed to be with their pets at the end of life.

### **Problems Identified**

- **Only one staff member is routinely assigned to perform euthanasia Monday-Friday. Staff is not assigned to perform euthanasia on weekends.** Whenever possible, two people should be assigned to perform euthanasia in order to minimize animal stress and enhance staff safety. This is in accordance with all national recommendations for the practice of euthanasia.
  - The FCAC SOP clearly states that euthanasia will be performed by two staff members (except in the case of neonatal or deeply sedated animals). However, this was neither consistent with our observations nor with statements made by staff regarding their experiences with euthanasia in the shelter.
  - Failure to euthanize animals on weekends results in a backlog of euthanasias that must be performed the following week, contributing to overcrowding in the shelter which compromises animal welfare and increases staff stress.

**FCAC Response:** Euthanasia decisions are based on an Assessment Team (A2), with the concurrence of the Director. Some animals have been euthanized on Saturdays, but this is evaluated on a case-by-case basis. Two Technicians are assigned to euthanasia each day, however after an animal is sedated, the second tech may leave for short periods of time to complete other tasks.

- **Staff members are experiencing compassion fatigue related to their responsibilities performing euthanasia.** This may be exacerbated when they are assigned to perform these procedures alone or when large numbers of animals must be euthanized on the same day.

**FCAC Response:** Each employee is aware of the Employee Assistance Program (EAP), as well as Compassion Fatigue training when available. The assignment of euthanasia is rotated between 10 employees

- **Verification of death was not consistently observed.** Verifying death is imperative to prevent animals from being disposed of when they are still alive.
  - Example: a litter of small kittens were euthanized by IP injection of Fatal Plus. Some of the kittens were placed in the barrel for disposal without having death verified by any means.

**FCAC Response:** All employees certified to perform euthanasia received recertification from the Humane Society of the United States (HSUS) in August of 2008. Any incidents of not verifying death is not adhering to their required training. This incident is not indicative of staff's performance of this issue.

- **Microchip scanning technique is inadequate.** Scanning technique was inconsistent among staff and usually consisted of rapid scanning over the neck and back with the scanner in light contact with the hair coat.

**FCAC Response:** Supervisors have provided multiple training sessions as to the proper methods of scanning. We have in place multiple stages in which we verify the existence of, or the lack there of, a microchip. Whenever a microchip is located and a staff member indicated the chip was not located, we provide further direction by identifying the chip was missed, and have that employee re-scan the animal.

- **Feral cats are not scanned prior to euthanasia.** Just because a cat behaves in a feral or fractious manner does not mean it is truly an unowned feral cat. Some tame cats remain highly reactive in the shelter setting and do not show their true colors, even after being allowed to settle in for a period of time.

**FCAC Response:** This statement is not accurate. Due to Feral cats being truly wild, they are scanned, however this can only be accomplished after the feral cat is sedated. We would not want to risk the safety of staff, volunteers or the public attempting the scan a feral cat.